

■ Original article

Family-oriented empowerment model influencing quality of life CABG patients**Ali Changizi¹, Reza Zeighami², Ensie Mirzaei^{3,*}, Mahmoud Alipour⁴**

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Abstract

Background and Purpose: Heart disease death rates have increased worldwide. Family-oriented empowerment model improves the quality of life in the patients with chronic diseases. This study aims to determine the effect of family-oriented empowerment model on the life quality of the patients undergoing coronary artery bypass graft.

Methods: A quasi-experimental study was performed on the patients undergoing CABG in both experimental and control groups before and after the surgery. Samples were put in the groups with a random arrangement and family-oriented empowerment model was applied for the experimental group. Firstly, Mac New Quality of Life Questionnaire was completed for both of them. The four-stage model of threat perception, problem solving, collaboration and training was carried out for the experimental group. One month later, the tools for both groups were completed and the data were analyzed by Mann-Whitney nonparametric test, sign test and SPSS17 software.

Results: The mean score of the control group before and after implementing the model was 137.5 ± 11.6 and 143.7 ± 9.6 ($p = 0.001$), respectively. They were 133.4 ± 13.3 and 148.2 ± 10.5 ($p = 0.00$), respectively in the test group.

Conclusions: These empowering models will lead to improved life quality by developing the inherent capacity of the individuals to take responsibility in life and help to make rational decisions and evaluate them.

KeyWords: Family-oriented empowerment model, Coronary artery bypass surgery, Quality of life, Semi-experimental, Nursing

Introduction

Today, non-communicable diseases have widely prevailed due to the phenomenon termed modernized societies, technological development and population density in urban areas, changes in life style and people's desire to inappropriate habits (1). The prevalence of coronary artery disease largely depends on lifestyle among which smoking, diet and exercise can be mentioned (2,3). Cardiovascular disease is the most important cause of morbidity and mortality in the world (4).

Cardiovascular diseases resulted in the death of 5.16 million people throughout the world in 2002 and it is estimated that the number of deaths due to this disease will reach 25 million in 2020 among which 19 million people will belong to developing countries (5,6,7). Cardiovascular diseases are the most common causes of death in our country, too (8). Coronary Artery Disease (CAD) is the first cause of death in Iran and accounts for 46% of all cause of deaths in the country (9).

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